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CONFIRMATION NO. 4648

|                                                                                                                                                                                                                                                                                                                               |                                                                                                                   |                                                                                                                                                                                                                                                                                 |                                 |                                          |
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| <b>SERIAL NUMBER</b><br>09/584,581                                                                                                                                                                                                                                                                                            | <b>FILING OR 371(c) DATE</b><br>05/31/2000<br><b>RULE</b>                                                         | <b>CLASS</b><br>379                                                                                                                                                                                                                                                             | <b>GROUP ART UNIT</b><br>2614   | <b>ATTORNEY DOCKET NO.</b><br>12406.0040 |
| <b>APPLICANTS</b><br>Gad Azriel, Holon, ISRAEL;<br>Yackov Sfadya, Kfar Saba, ISRAEL;                                                                                                                                                                                                                                          |                                                                                                                   |                                                                                                                                                                                                                                                                                 |                                 |                                          |
| <b>** CONTINUING DATA *****</b> <i>none TTP</i>                                                                                                                                                                                                                                                                               |                                                                                                                   |                                                                                                                                                                                                                                                                                 |                                 |                                          |
| <b>** FOREIGN APPLICATIONS *****</b> <i>none TTP</i>                                                                                                                                                                                                                                                                          |                                                                                                                   |                                                                                                                                                                                                                                                                                 |                                 |                                          |
| <b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b><br><b>** 07/25/2000</b>                                                                                                                                                                                                                                                    |                                                                                                                   |                                                                                                                                                                                                                                                                                 |                                 |                                          |
| Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no<br>35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance<br>Verified and Acknowledged <i>[Signature]</i><br>Examiner's Signature Initials | <b>STATE OR COUNTRY</b><br>ISRAEL                                                                                 | <b>SHEETS DRAWING</b><br>11                                                                                                                                                                                                                                                     | <b>TOTAL CLAIMS</b><br>24<br>28 | <b>INDEPENDENT CLAIMS</b><br>2           |
| <b>ADDRESS</b><br>31108                                                                                                                                                                                                                                                                                                       |                                                                                                                   |                                                                                                                                                                                                                                                                                 |                                 |                                          |
| <b>TITLE</b><br>Four channel audio recording in a packet based network                                                                                                                                                                                                                                                        |                                                                                                                   |                                                                                                                                                                                                                                                                                 |                                 |                                          |
| <b>FILING FEE RECEIVED</b><br>1262                                                                                                                                                                                                                                                                                            | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: |                                                                                                                                                                                                                                                                                 |                                 |                                          |
|                                                                                                                                                                                                                                                                                                                               |                                                                                                                   | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees ( Filing )<br><input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )<br><input type="checkbox"/> 1.18 Fees ( Issue )<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |                                 |                                          |